	PATE	NT APPLICA	ATION FE	E DETERN	MINATION RE	CORD	Applicati	on or	Docke: 1	Number
	·		mective C	otober 1, 20	003		10/	5	088	318
	TOTAL CLA			ED - PART Dlumn 1)	(Column 2)	SMALI TYPE	L ENTITY	Y OTHER TH		ER THAN
	FOR					RAT	E FEE	7		
	l			BER FILED	NUMBER EXTRA	-		-	RATE	
\parallel	TOTAL CHARGEABLE CLAIMS			minus 20=	*	-			BASIC F	920
	INDEPENDENT CLAIMS			minus 3 =	*	XS 9	=	OR	X\$18:	=
	MULTIPLE DEPENDENT CLAIM P			PRESENT		X43=	:	OR	X86=	86
-	If the differe	DCO ID columnia				-145=		OR	-290=	
	water differen			ess than zero. enter "0" in column 2			-	ا آ		
		CLAIMS AS	TOTAL	<u> </u>	OR	TOTAL				
II.	4	(Column CLAIMS		(Column 2) (Column 3			L ENTITY	OR		R THAN - ENTITY
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ENDMENT B	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								DUN. FEE	<u> </u>
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ပ		CLAIMS REMAINING								
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	he entry in column the "Highest Num the "Highest Num	+145=	OF	<u> </u>	290=					
11 1T :	the *Highest Numi ie *Highest Numi	ADDIT FEE	OR	ADDI	TOTAL T. FEE					
	TO-875 (Rev 10)		(· ciai ()	uependent) is	than 3, enter "3," the highest number t	ound in the appro	priate box in c	olumn	1.	